U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFUL			
READ THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT.		
E (AUG152005)	A		
Q _{MS} ON			
1. File Number U - 6875	2. Fiscal Year Covered From:		
	1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Asa A Summers	Name IBEW Local 1700-4		
	Labor Organization File Number 5/1305		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any 10156		
Street Chenevert Road	Street Chenevert Road		
City Waggaman	City Waggaman		
State Louisiana ZIP Code + 4 70094-2057	State Louisiana ZIP Code + 4 70094-2057		
5. Position in labor organization. Treasurer			
Enter appropriate data below if, during the past fiscal year, you or your spo	ouse or minor child directly or indirectly had any of the following interests usions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or	derived income or other economic benefit of		
monetary value from an employer whose employees your organization	ion represents or is actively seeking to represent		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
6. Name and address of Employer (including trade name, if any). Name $ \mathbb{N}/A $			
	7.a. Nature of Interest, Transaction, or Income.		
Name N/A	7.a. Nature of Interest, Transaction, or Income.		
Name N/A Trade Name, if any:	7.a. Nature of Interest, Transaction, or Income.		
Name N/A Trade Name, if any:	7.a. Nature of Interest, Transaction, or Income. N/A		
Name N/A Trade Name, if any: P.O. Box, Bldg., Room No., if any	7.a. Nature of Interest, Transaction, or Income. N/A		
Name N/A Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	7.a. Nature of Interest, Transaction, or Income. N/A 7.b. Amount.		
Name N/A Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. N/A 7.b. Amount.		
Name N/A Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompanundersigned's knowledge and belief, true, correct, and complete. (See the see	7.a. Nature of Interest, Transaction, or Income. N/A 7.b. Amount. \$0 Perjury and other applicable penalties of the law, that all of the information ying documents), has been examined by the signatory and is, to the best of the		
Name N/A Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompanundersigned's knowledge and belief, true, correct, and complete. (See the see	7.a. Nature of Interest, Transaction, or Income. N/A 7.b. Amount. \$0 Perjury and other applicable penalties of the law, that all of the information ying documents), has been examined by the signatory and is, to the best of the action on penalties in the instructions.)		
Name N/A Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompan	7.a. Nature of Interest, Transaction, or Income. N/A 7.b. Amount. \$0 Perjury and other applicable penalties of the law, that all of the information ying documents), has been examined by the signatory and is, to the best of the		

Name of Person Filing Asa Summers	File Number U -				
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
Name and address of Business (including trade name, if any).	9. Business deals with:				
Name Holland Capital Management					
Trade Name, if any:	a. Labor Organization				
P.O. Box, Bldg., Room No., if any Suite700	b. Trust				
Street One North Wacker Dr.					
City Chicago					
State Illinois ZIP Code + 4					
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Name TMSEL Retirment Income Plan	Investment manager to pension fund				
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street Plaza Drive					
City New Orleans	11.b. Approximate dollar value of such dealing.				
	12.a. Nature of interest held or income received. Lunch April 15 2005 \$40				
State Louisiana ZIP Code + 4 70127-2677					
	12.b. Amount. \$40				
	landaria de la constanta de la				
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.				
Name N/A					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street					
City					
State ZIP Code + 4					
13 h le the Business an Employer or Consultant 2	14.b. Amount of payment.				

Name of Person Filing Asa	Summers	File Num	iber U-	

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (includ	ing trade name, if any	y).	9. Business deals with:	
Name Westcap Investments			a. Labor Organization	
Trade Name, if any:			d. Labor Organization	
P.O. Box, Bldg., Room No., if any 11111			b. Trust	
Street Santa Monica Blvd. Suit	ze 820		c. Employer	
City Los Angeles				
State California	ZIP Code + 4 9002	25		
10. If 9.b. or 9.c. is checked give trust or emp	oloyer's name.		11.a. Nature of such dealing.	ws Several registral Serving control of the Control
Name TMSEL Retirment Income	Plan		Investment manager to pension fund	THE CONTRIBUTION OF THE CO
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any 6700				миниционератично
Street Plaza Drive	a populago por esta esta esta por esta por esta por esta por esta por esta de la complexación de la complexa	anni armalamentamenta lainen kaikamentamenyyyy yyyyyyyy gantaisia kaikan kaika		палоголительного
City New Orleans	NAMEN AND AND AND AND AND AND AND AND AND AN			ere communicación de la co
State Louisiana	ZIP Code + 4 7012	7-2677	11.b. Approximate dollar value of such dealing.	
			12.a. Nature of interest held or income received.	
			Dinner October 21 \$60	
				day yellor a day a
				Commenter of the Commen
				Acontinuosere
			12.b. Amount.	\$60

Name of Person Filing Asa Summers	File Number U-
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Part B Continuation Page

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8. Name and address of Business (includ	ling trade name, i	if any).	9. Business deals with:	
Name TMSEL Retirment Income Trade Name, if any:	Plan		a. Labor Organization	
P.O. Box, Bldg., Room No., if any 6700			X b. Trust	
Street Plaza Drive			c. Employer	
City New Orleans				
State Louisiana	ZIP Code + 4 7	0127-2677		
10. If 9.b. or 9.c. is checked give trust or emp	oloyer's name.		11.a. Nature of such dealing.	
Name TMSEL Retirment Income	Plan Plan Control of the control o		Trustee training	
Trade Name, if any:				execution production and the second producti
P.O. Box, Bldg., Room No., if any 6700				vuarproductions
Street Plaza Drive	ung dang pungmanan menyagad beralah dianah land digerim bidan lagi diserim diangkal beralagi diserbasi Bandan diangkal beralam pungkal beralah diangkal beralam diangkal beralam diangkal beralam diangkal beralam di	o'r ddd arlan fri'n girnodd r e bo'r rol e dd, gir, whild rened a benn repropagg gaell y gaell y gaell gaeld de fri rol dd alland da'r hillig mei feelin da Girmen benn y gaell y gaell y gaell y gaell y gaell y gael		bioutilitiesed tabases
City New Orleans				en al diametric del compression de la compression della compressio
State Louisiana	ZIP Code + 4 7	0127-2677	11.b. Approximate dollar value of such dealing.	
			12.a. Nature of interest held or income received.	
			International Foudation Conference November 2004 Registration \$915 Hotel \$578.91 Perdium \$320	New orleans,
			12.b. Amount.	\$1,814

Name of Person Filing Asa	Summers	File Number U-

Part B Continuation Page

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Franklin Templeton Private Client Group Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any Bldg. 910	D. Trust	
Street 1 Franklin Pkwy 3rd Floor	c. Employer	
City San Mateo		
State California ZIP Code + 4 94403		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name TMSEL Retirment Income Plan	Investment Managerto pension fund	остоя в советский
Trade Name, if any:	O DE CONTRACTOR	ocynica willione engine
P.O. Box, Bldg., Room No., if any 6700		oppose and a second consistency of the secon
Street Plaza Drive		000000000000000000000000000000000000000
City New Orleans		
State Louisiana ZIP Code + 4 70127-2677	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	Dinner July 15 2004 \$60	and the state of t
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	12.b. Amount.	\$60